

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000006817

FILED
Jul 29, 2005
Secretary of State

Entity Name: THE BAY COUNTY HORSEMAN'S ASSOCIATION, INC.

Current Principal Place of Business:

6829 KEITHLY ROAD
PANAMA CITY, FL 32404

New Principal Place of Business:

905 MCKENZIE AVE
PANAMA CITY, FL 32401

Current Mailing Address:

6829 KEITHLY ROAD
PANAMA CITY, FL 32404

New Mailing Address:

PO 1422
LYNN HAVEN, FL 32404

FEI Number: 04-3638260 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SMITH, WALTER B
115 E. FOURTH STREET
PANAMA CITY, FL 32401 US

Name and Address of New Registered Agent:

BAXTER, TINA
905 MCKENZIE AVE.
PANAMA CITY, FL 32401 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: TINA BAXTER

07/29/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HAND-FAGG, DARA
Address: 6829 KEITHLY ROAD
City-St-Zip: PANAMA CITY, FL 32404

Title: VD () Delete
Name: SMITH, MARILYN
Address: 6303 JOHN PITTS ROAD
City-St-Zip: PANAMA CITY, FL 32404

Title: TD () Delete
Name: CHILES, DESMA
Address: 3336 LONG ROAD
City-St-Zip: PANAMA CITY, FL 32444

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BAXTER, TINA
Address: 905 MCKENZIE AVE.
City-St-Zip: PANAMA CITY, FL 32401

Title: V (X) Change () Addition
Name: SMITH, MARILYN
Address: 6303 JOHN PITTS ROAD
City-St-Zip: PANAMA CITY, FL 32404

Title: T (X) Change () Addition
Name: DUNLAP, ELIZABETH
Address: 2336 PERCH POND RD.
City-St-Zip: CHIPLEY, FL 32428

Title: S () Change (X) Addition
Name: RUSHING, TAMMY
Address: 8225 SW CO. RD. 12
City-St-Zip: YOUNGSTOWN, FL 32466

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIZABETH DUNLAP

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07/29/2005

Electronic Signature of Signing Officer or Director

Date